

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000047498

Entity Name: ALPOLAT LLC

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5201 BLUE LAGOON DRIVE  
SUITE 800  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

5201 BLUE LAGOON DRIVE  
SUITE 800  
MIAMI, FL 33126

**New Mailing Address:**

FEI Number: 45-1840906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TARAVAY, ELIAS B  
5201 BLUE LAGOON DRIVE  
SUITE 800  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TARAVAY, ELIAS B  
Address: 5201 BLUE LAGOON DRIVE STE 800  
City-St-Zip: MIAMI BEACH, FL 33126

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ELIAS TARAVAY

MGR

04/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date